2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002121

Entity Name: PEOPLE REACHING PEOPLE, INC.

FILED Apr 04, 2025 **Secretary of State** 1960451812CC

Current Principal Place of Business:

C/O TODD A MCGREGOR 7841 SE HERITAGE BLVD HOBE SOUND, FL 33455

Current Mailing Address:

C/O TODD A MCGREGOR 7841 SE HERITAGE BLVD HOBE SOUND, FL 33455 US

FEI Number: 26-2511265 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCGREGOR, TODD A C/O TODD A MCGREGOR 7841 SE HERITAGE BLVD HOBE SOUND, FL 33455 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: TODD A MCGREGOR 04/04/2025

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title Title D

Name MCGREGOR, TODD A RT. REV. Name MCGREGOR, PATRICIA C REV

Address C/O TODD A MCGREGOR Address C/O TODD A MCGREGOR

7841 SE HERITAGE BLVD 7841 SE HERITAGE BLVD

City-State-Zip: HOBE SOUND FL 33455 City-State-Zip: HOBE SOUND FL 33455

Title D, VP Title D, TREASURER

Name HARMAN, CHERYL Name HARMAN, WILL

Address 1134 ISLAND DRIVE Address 1134 ISLAND DRIVE

City-State-Zip: DELRAY BEACH FL 33483 City-State-Zip: DELRAY BEACH FL 33483

Title Title D D

Name JONES. WALTER FLETCHER, JOYCE Name

216 W. EVERGREEN STREET Address 4740 S. OCEAN BLVD. #315 Address

HIGHLAND BEACH FL 33487 City-State-Zip: WHEATON IL 60187 City-State-Zip:

Title **DIRECTOR** Title **DIRECTOR**

Name VERINDER, LAURA VERINDER, SYDNEY Name Address 1906 VICTORIA CIRCLE 1906 VICTORIA CIRCLE Address MCKINNEY TX 75072

City-State-Zip: City-State-Zip: MCKINNEY TX 75072

Continues on page 2

04/04/2025 SIGNATURE: TODD MCGREGOR **PRESIDENT**

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

Officer/Director Detail Continued:

Title DIRECTOR
Name KIMES, DIANE

Address 2 RIVERVIEW DRIVE

City-State-Zip: SEWALL'S POINT FL 34996